

Work Order ID 94134

November-30-12 9:26:43 AM

94134

Page 1

Item ID: D412-760-015

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Cabin Floor Protector

Start Date: 11/30/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 12/14/12 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: MLJ Date: 12-12-03

Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____

Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
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IIN-D412-760	F
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100

100

DC

Document Control

DOCUMENT CONTROL

Memo

Photocopy bluefile & type labels per PPP D412-760-015 CHG002

0.00

0.00

110

110

Packaging

Packaging

Pick Kit

Memo

0.00

0.00

120

120

QC

Quality Control

QC4- 100% Inspect kits for completeness

Memo

0.00

0.00

Handwritten signature and date: 12-12-18

Handwritten signature and date: 12/12/18 JB

Handwritten signature and date: 12.12.19

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Skid-tube <input type="checkbox"/></td> <td style="width: 33%;">Crosstube <input type="checkbox"/></td> <td style="width: 33%;">Water Jet <input type="checkbox"/></td> <td style="width: 33%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector																		
Doc/Data <input type="checkbox"/>																											
Equip/Tooling <input type="checkbox"/>																											
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Process <input type="checkbox"/>																											
Supplier <input type="checkbox"/>																											
Training <input type="checkbox"/>																											
Unapproved <input type="checkbox"/>																											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 94134***94134***

Page 2

November-30-12 9:26:43 AM

Item ID: D412-760-015

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Cabin Floor Protector

Start Date: 11/30/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 12/14/12 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130		0.00							
130	Packaging								
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP D412-760-015								
	Location: <u>FW 112</u>								
	PPP Rev: _____								
140									
140	QC21- Final Inspection - Work Order Release	0.00							
QC	Memo	0.00							
Quality Control									

(10) SL 12/12/19 06 9-5

12/2/20 DJ

12-20-12

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
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Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
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FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Picklist Print

November-30-12 9:26:42 AM

Page 1

Work Order ID: 94134

Parent Item: D412-760-015

Parent Item Name: Cabin Floor Protector

Start Date: 11/30/12

Required Date: 12/14/12

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP rev A 07.07.05 new issue EC
IPP Rev:B 08-08-20 revB as per dwg DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
AN960JD10 Washer	NAS1149D0363J	Purchased	No			110	Each	0.0000	28	28	✓	20	8
AN960JD416 Washer	NAS1149D0463J	Purchased	No			110	Each	29.0000	12	12	✓	20	8
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST351		29							
				116289		8							
				119097		21							
D3574-5 Cabin Floor Protector		Manufactured	No			110	Each	0.0000	1	1	✓	94185	8
D3574-6 Cabin Floor Protector		Manufactured	No			110	Each	0.0000	1	1	✓	94127	8
D3575-5 Cabin Floor Protector		Manufactured	No			110	Each	0.0000	1	1	✓	94124	8
D3575-6 Cabin Floor Protector		Manufactured	No			110	Each	0.0000	1	1	✓	94159	8
D3580-1 Joggle Bracket		Manufactured	No			110	Each	128.0000	6	6	✓	20	8
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST245A		128							
				78232		9							
				84618		44							
				89834		75							
D3628-1 Cupped Washer		Manufactured	No			110	Each	377.0000	14	14	✓	20 12/12/18	8
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				FG		10							
				83587		10							
				ST061		367							
				83587		367							

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
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Supplier											
Training											
Unapproved											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Picklist Print

November-30-12 9:26:42 AM

Page 2

Work Order ID: 94134

Parent Item: D412-760-015

Parent Item Name: Cabin Floor Protector

Start Date: 11/30/12

Required Date: 12/14/12

Start Qty: 1.00

Required Qty: 1.00

~~D3628-3~~
Cupped Washer

SMB

Manufactured No

110 Each 122.0000

6 6 ✓ JB

Location

Loc Qty

Loc Code

ST061

122

68213

122

68213 6 ✓ JB

~~MS24694-S100~~
FLAT HEAD SCREW

SMB

Purchased No

110 Each 97.0000

Location

Loc Qty

Loc Code

ST303

97

118840

4

120422

3

123023

90

123023 14 ✓ JB 12/12/18

~~MS24694-S54~~
Screw

SMB

Purchased No

110 Each 20.0000

Location

Loc Qty

Loc Code

ST302

20

120361

1

122814

19

122814

November-30-12 9:26:42 AM

Shop Packet Print

Page 2

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

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QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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REFERENCE ONLY

Smb

DART AEROSPACE LTD.

IIN-D412-760

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5.0 PARTS LIST

Qty -011	Qty -013	Qty -015	Qty -017	Qty -019	Part Number	Description
X					D412-760-011	CABIN FLOOR PROTECTOR KIT
	X				D412-760-013	CABIN FLOOR PROTECTOR KIT
		X			D412-760-015	CABIN FLOOR PROTECTOR KIT
			X		D412-760-017	CABIN FLOOR PROTECTOR KIT
				X	D412-760-019	CABIN FLOOR PROTECTOR KIT
1					D3574-1	CABIN FLOOR PROTECTOR
1					D3574-2	CABIN FLOOR PROTECTOR
	1				D3574-3	CABIN FLOOR PROTECTOR
	1				D3574-4	CABIN FLOOR PROTECTOR
		1			D3574-5	CABIN FLOOR PROTECTOR
		1			D3574-6	CABIN FLOOR PROTECTOR
1					D3575-1	CABIN FLOOR PROTECTOR
1					D3575-2	CABIN FLOOR PROTECTOR
	1				D3575-3	CABIN FLOOR PROTECTOR
	1				D3575-4	CABIN FLOOR PROTECTOR
		1			D3575-5	CABIN FLOOR PROTECTOR
		1			D3575-6	CABIN FLOOR PROTECTOR
6	4	6	6	6	D3580-1	JOGGLE BRACKET
			1		D3788-1	CABIN FLOOR PROTECTOR
			1		D3788-2	CABIN FLOOR PROTECTOR
			1		D3788-3	CABIN FLOOR PROTECTOR
			1		D3788-4	CABIN FLOOR PROTECTOR
14	40	14	14	10	D3628-1	CUPPED WASHER
6	8	6	6		D3628-3	CUPPED WASHER
				1	D4122-1	FLOOR PROTECTOR, FORWARD
				1	D4122-3	FLOOR PROTECTOR, AFT
28		28	28		NAS1149D0363J	WASHER (AN960JD10)
12		12	12		NAS1149D0463J	WASHER (AN960JD416)
14		14	14		MS24694S54	SCREW
6		6	6		MS24694S100	SCREW

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Revision: F
Date: 12.08.30